PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This fo appropriate. All further co- indicated unless corrected maintenance fee notification	below or directed oth	or transmitting the ISSU g the Patent, advance of erwise in Block 1, by (a	a) specifying a new corresp	ondence address; and/o	r (b) indicating a sepa	rate "FEE ADDRESS" for	
••••••••••••••••••••••••••••••••••••••				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
7: KRAMER & AN	590 06/11/ JADO, P.C.	2009		Certificat	e of Mailing or Trans:	mission I denosited with the United	
Suite 240 1725 Duke Street Alexandria, VA 22314				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below			
							, Hextinenti, 171 D
						(Signature)	
		· · · · · · · · · · · · · · · · · · ·				(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	ORNEY DOCKET NO.	CONFIRMATION NO.	
10/510,177 TITLE OF INVENTION: S	10/04/2004 STRUCTURAL I-BEA	M AUTOMOTIVE SU	Robert Alexander Howell SPENSION ARM		BAE 3055	6771	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	МО	S1510	\$300	S0	\$1810	09/11/2009	
EXAMIN	ER	ART UNIT	CLASS-SUBCLASS				
CULBRETH, ERIC D		3616	280-124134				
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a	te of a single firm (having as a member a attorney or agent) and the names of up to dispatent attorneys or agents. If no name is			
3. ASSIGNEE NAME AN	D RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty)	pe)			
		ified below, no assigned pletion of this form is NO	_	=		locument has been filed for	
(A) NAME OF ASSIGNMULTIMATIC,			(B) RESIDENCE: (CITY and STATE OR COUNTRY) Markham, ON, Canada				
Hobitimitio, the. Hatkitam, ON, Canada							
Please check the appropria	te assignee category or	r categories (will not be p	printed on the patent) : \Box	Individual 🖾 Corpora	ation or other private gr	oup entity Government	
4a. The following fee(s) ar Issue Fee Publication Fee (No Advance Order - #	small entity discount	permitted)	 Ib. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). 				
5. Change in Entity State a. Applicant claims		•	☐ b. Applicant is no lor	nger claiming SMALL E	NTITY status, See 37 (CFR 1,27(g)(2).	
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if receords of the United St	quired) will not be accept ates Patent and Tradema	ted from anyone other than rk Office.	the applicant; a registere	d attorney or agent; or	the assignee or other party in	
Authorized Signature		2		Date Ju	ly 7, 2009	ANY AND MAINTAIN THE PROPERTY OF THE PROPERTY	
Typed or printed name	Arlir M.	Amado		Registration No.	51,399	The same of the sa	
This collection of informa an application. Confidenti submitting the completed this form and/or suggestic Box 1450. Alexandria Vi	tion is required by 37 ality is governed by 3 application form to those for reducing this burginia 22313-1450. D	CFR 1.311. The informa 5 U.S.C. 122 and 37 CF to USPTO. Time will va arden, should be sent to O NOT SEND FEES OI	tion is required to obtain or R 1.14. This collection is ea try depending upon the indi the Chief Information Offic R COMPLETED FORMS I	retain a benefit by the prestimated to take 12 minu vidual case. Any commeter, U.S. Patent and Trad O THIS ADDRESS, SE	nblic which is to file (mates to complete, includents on the amount of the mark Office, U.S. De ND TO: Commissione	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450,	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.